Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)		T	TYPE		OR	OR SMALL ENTIT	
TOTAL CLAIMS			2+5		To design			RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	→∫ minus 20=		25			X\$ 9=		OR	X\$18=	40
IND	EPENDENT CL	min	3 =				X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	<u>[</u>	TOTAL		OR	TOTAL	1160
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 416	Minus	4	15	= /		X\$ 9=		OR	X\$18=	18.
	Independent	· 3	Minus			=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT					I CLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE	**	OR-	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AINA	=	4 1	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	San)										
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	IMN 2) HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ars.	RATE	ADDI- TIONAL FEE
	Total		Minus	**	٠	= .		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***				X40=		OR	X80=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT				IT CLAIM]	+135=	·			1
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE											
	The "Highest Num	that Provincely Pa	id For" (Total or	Indenen	dent) is th	e highest numb	per foi	und in the ap	propriate bo	x in co	olumn 1.	